

and intended to be proposed to the bill H.R. 3967, to improve health care and benefits for veterans exposed to toxic substances, and for other purposes; which was ordered to lie on the table; as follows:

At the end of title I, add the following:

Subtitle C—Other Health Care Matters

SEC. 121. MODIFICATION OF DETERMINATION OF ELIGIBILITY OF VETERANS FOR TREATMENT AS A LOW-INCOME FAMILY FOR PURPOSES OF ENROLLMENT IN THE PATIENT ENROLLMENT SYSTEM OF THE DEPARTMENT OF VETERANS AFFAIRS.

(a) **AREAS OF RESIDENCE.**—The Secretary of Veterans Affairs shall modify the areas in which veterans reside as specified for purposes of determining whether veterans qualify for treatment as low-income families for enrollment in the patient enrollment system of the Department of Veterans Affairs under section 1705(a)(7) of title 38, United States Code, to meet the requirements as follows:

(1) Any area so specified shall be within only one State.

(2) Any area so specified shall be coextensive with one or more counties (or similar political subdivisions) in the State concerned.

(b) **VARIABLE INCOME THRESHOLDS.**—The Secretary shall modify the thresholds for income as specified for purposes of determining whether veterans qualify for treatment as low-income families for enrollment in the patient enrollment system referred to in subsection (a) to meet the requirements as follows:

(1) There shall be one income threshold for each State, equal to 100 percent of the highest income threshold among—

(A) the counties or metropolitan statistical areas within such State; and

(B) any metropolitan statistical area that encompasses territory of such State and one or more other States.

(2) The calculation of the highest income threshold of a county or metropolitan statistical area shall be consistent with the calculation used for purposes of section 3(b) of the United States Housing Act of 1937 (42 U.S.C. 1437a(b)).

(3) The timing and methodology for implementing any modifications in geographic income thresholds pursuant to paragraph (1) shall be determined by the Secretary in such a manner as to permit the Department to build capacity for enrolling such additional veterans in the patient enrollment system of the Department as become eligible for enrollment as a result of such modifications, except that all required modifications shall be completed not later than five years after date of the enactment of this Act.

(c) **METROPOLITAN STATISTICAL AREA.**—In this section, the term “metropolitan statistical area” has the meaning given that term by the Office of Management and Budget.

SEC. 122. GUARANTEE OF HEALTH CARE BENEFITS FOR ENROLLED VETERANS.

The Secretary of Veterans Affairs shall ensure that all veterans, once enrolled in the patient enrollment system of the Department of Veterans Affairs under section 1705(a) of title 38, United States Code, remain enrolled in such system and may continue receiving health care furnished by the Department if they choose, subject to such cost-sharing requirements as may apply to the veteran under existing provisions of law.

SA 5060. Mr. PAUL submitted an amendment intended to be proposed to amendment SA 5051 submitted by Mr. TESTER (for himself and Mr. MORAN) and intended to be proposed to the bill

H.R. 3967, to improve health care and benefits for veterans exposed to toxic substances, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place, insert the following:

SEC. —. OFFSET THROUGH TEMPORARY REDUCTION IN FOREIGN ASSISTANCE PROGRAMS.

During the 10-year period beginning on October 1, 2022, no Federal funds may be expended by the United States Agency for International Development other than funds that have been appropriated for Israel.

SA 5061. Ms. LUMMIS submitted an amendment intended to be proposed to amendment SA 5051 submitted by Mr. TESTER (for himself and Mr. MORAN) and intended to be proposed to the bill H.R. 3967, to improve health care and benefits for veterans exposed to toxic substances, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 58, strike line 19 and all that follows through page 61, line 11, and insert the following:

(c) **EFFECTIVE DATES AND APPLICABILITY.**—

(1) **IN GENERAL.**—The amendment made by subsection (b) shall take effect on the date of the enactment of this Act and shall apply as follows:

(A) On the date of the enactment of this Act for claimants for dependency and indemnity compensation under chapter 13 of title 38, United States Code, and for veterans whom the Secretary of Veterans Affairs determines are—

- (i) terminally ill;
- (ii) homeless;
- (iii) under extreme financial hardship;
- (iv) more than 85 years old; or
- (v) capable of demonstrating other sufficient cause.

(B) On October 1, 2022, for everyone not described in subparagraph (A).

(2) **RETROACTIVE APPLICATION.**—Notwithstanding any Federal court decisions or settlements in effect on the day before the date of the enactment of this Act, the Secretary of Veterans Affairs shall award retroactive claims for a condition under section 1116(a)(2)(L) of title 38, United States Code, as added by subsection (b) of this section, only to claimants for dependency and indemnity compensation under chapter 13 of such title described in paragraph (1)(A) of this subsection.

SA 5062. Ms. LUMMIS submitted an amendment intended to be proposed to amendment SA 5051 submitted by Mr. TESTER (for himself and Mr. MORAN) and intended to be proposed to the bill H.R. 3967, to improve health care and benefits for veterans exposed to toxic substances, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 58, strike line 5 and all that follows through page 61, line 11.

SA 5063. Mr. MORAN submitted an amendment intended to be proposed to amendment SA 5051 submitted by Mr. TESTER (for himself and Mr. MORAN) and intended to be proposed to the bill H.R. 3967, to improve health care and benefits for veterans exposed to toxic substances, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 117, strike line 22 and all that follows through page 121, line 12.

SA 5064. Mr. MORAN submitted an amendment intended to be proposed to amendment SA 5051 submitted by Mr. TESTER (for himself and Mr. MORAN) and intended to be proposed to the bill H.R. 3967, to improve health care and benefits for veterans exposed to toxic substances, and for other purposes; which was ordered to lie on the table; as follows:

At the end of title I, add the following:

Subtitle C—Other Health Care Matters

SEC. 121. MODIFICATION TO STANDARDS FOR ACCESS TO HEALTH CARE FROM DEPARTMENT OF VETERANS AFFAIRS AND NON-DEPARTMENT PROVIDERS.

(a) **IN GENERAL.**—Section 1703B of title 38, United States Code, is amended—

(1) by striking subsections (a) through (e) and inserting the following new subsections: “(a) **THRESHOLD ELIGIBILITY STANDARDS FOR ACCESS TO COMMUNITY CARE.**—(1) A covered veteran may elect to receive non-Department hospital care, medical services, or extended care services through the Veterans Community Care Program under section 1703 of this title pursuant to subsection (d)(1)(D) of such section using the following eligibility access standards:

“(A) With respect to primary care, mental health care, or non-institutional extended care services, if the Department cannot schedule an appointment for the covered veteran with a health care provider of the Department—

“(i) within 30 minutes average driving time from the residence of the veteran; and

“(ii) within 20 days of the date of request for such an appointment unless a later date has been agreed to by the veteran in consultation with the health care provider.

“(B) With respect to specialty care or specialty services, if the Department cannot schedule an appointment for the covered veteran with a health care provider of the Department—

“(i) within 60 minutes average driving time from the residence of the veteran; and

“(ii) within 28 days of the date of request for such an appointment unless a later date has been agreed to by the veteran in consultation with the health care provider.

“(2) For the purposes of determining the eligibility of a covered veteran for care or services under paragraph (1), the Secretary shall not take into consideration the availability of telehealth appointments from the Department when determining whether the Department is able to furnish such care or services in a manner that complies with the eligibility access standards under such paragraph.

“(b) **ACCESS TO CARE STANDARDS FOR COMMUNITY CARE.**—(1) Subject to subsection (c), the Secretary shall meet the following access to care standards when furnishing non-Department hospital care, medical services, or extended care services to a covered veteran through the Veterans Community Care Program under section 1703 of this title:

“(A) With respect to an appointment for primary care, mental health care, or non-institutional extended care services—

“(i) within 30 minutes average driving time from the residence of the veteran unless a longer driving time has been agreed to by the veteran; and

“(ii) within 20 days of the date of request for such an appointment unless a later date has been agreed to by the veteran.

“(B) With respect to an appointment for specialty care or specialty services—

“(i) within 60 minutes average driving time from the residence of the veteran unless a

longer driving time has been agreed to by the veteran; and

“(ii) within 28 days of the date of request for such an appointment unless a later date has been agreed to by the veteran.

“(2) The Secretary shall ensure that—

“(A) health care providers specified under section 1703(c) of this title are able to comply with the applicable access to care standards under paragraph (1) for such providers; and

“(B) meeting such standards is reflected in the contractual requirements of third-party administrators.

“(c) WAIVERS TO ACCESS TO CARE STANDARDS FOR COMMUNITY CARE PROVIDERS.—(1) A third-party administrator may request a waiver to the requirement to meet the access to care standards under subsection (b) if—

“(A)(i) the scarcity of available providers or facilities in the region precludes the third-party administrator from meeting those access standards; or

“(ii) the landscape of providers or facilities has changed and certain providers or facilities are not available such that the third-party administrator is not able to meet those access standards; and

“(B) to address the scarcity of available providers or the change in the provider or facility landscape, as the case may be, the third-party administrator has contracted with other providers or facilities that may not meet those access standards, but are the currently available providers or facilities most accessible to veterans within the region of responsibility of the third-party administrator.

“(2) Any waiver requested by a third-party administrator under paragraph (1) must be requested in writing and submitted to the Office of Community Care of the Department for approval by that office.

“(3) As part of any waiver request under paragraph (1), a third-party administrator must include conclusive evidence and documentation that the access to care standards under subsection (b) cannot be met because of scarcity of available providers or changes to the landscape of providers or facilities.

“(4) In evaluating a waiver request under paragraph (1), the Secretary shall consider the following:

“(A) The number and geographic distribution of eligible health care providers available within the geographic area and specialty referenced in the waiver request.

“(B) The prevailing market conditions within the geographic area and specialty referenced in the waiver request, which shall include the number and distribution of health care providers contracting with other health care plans (including commercial plans and the Medicare program under title XVIII of the Social Security Act (42 U.S.C. 1395 et seq.)) operating in the geographic area and specialty referenced in the waiver request.

“(C) Whether the service area is comprised of highly rural, rural, or urban areas or some combination of such areas.

“(D) How significantly the waiver request differs from the access to care standards under subsection (b).

“(E) The rates offered to providers in the geographic area covered by the waiver.

“(5) The Secretary shall not consider inability to contract as a valid sole rationale for granting a waiver under paragraph (1).

“(d) CALCULATION OF DRIVING TIMES AND WAIT TIMES.—(1) For purposes of calculating average driving time from the residence of the veteran under subsections (a) and (b), the Secretary shall use geographic information system software.

“(2) For purposes of calculating the wait time for a veteran to schedule an appointment with the Department under subsection

(a), the Secretary shall measure from the date of request for the appointment unless a later date has been agreed to by the veteran in consultation with a health care provider of the Department to the first next available appointment date in the clinic schedule relevant to the requested medical service.

“(e) PERIODIC REVIEW OF ACCESS STANDARDS.—Not later than three years after the date of the enactment of the Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics Act of 2022, and not less frequently than once every three years thereafter, the Secretary shall—

“(1) conduct a review of the eligibility access standards under subsection (a) and the access to care standards under subsection (b) in consultation with—

“(A) such Federal entities as the Secretary considers appropriate, including the Department of Defense, the Department of Health and Human Services, and the Centers for Medicare & Medicaid Services;

“(B) entities in the private sector; and

“(C) other entities that are not part of the Federal Government; and

“(2) submit to the appropriate committees of Congress a report on—

“(A) the findings of the Secretary with respect to the review conducted under paragraph (1); and

“(B) such recommendations as the Secretary may have with respect to the eligibility access standards under subsection (a) and the access to care standards under subsection (b).”;

(2) in subsection (f), by striking “The Secretary” and inserting “COMPLIANCE BY COMMUNITY CARE PROVIDERS.—The Secretary”;

(3) by striking subsection (g) and inserting the following new subsection (g):

“(g) PUBLICATION OF ACCESS STANDARDS.—The Secretary shall publish in the Federal Register and on a publicly available internet website of the Department—

“(1) the eligibility access standards established under subsection (a); and

“(2) the access to care standards established under subsection (b).”;

(4) in subsection (h)(1), by striking “(1) Consistent with” and inserting “REQUESTS FOR DETERMINATIONS.—(1) Consistent with”; and

(5) in subsection (i)—

(A) by striking “In this section” and inserting “DEFINITIONS.—In this section”; and

(B) by adding at the end the following new paragraphs:

“(3) The term ‘inability to contract’, with respect to a third-party administrator, means the inability of the third-party administrator to successfully negotiate and establish a community care network contract with a provider or facility.

“(4) The term ‘third-party administrator’ means an entity that manages a provider network and performs administrative services related to such network within the Veterans Community Care Program under section 1703 of this title.”.

(b) PREVENTION OF SUSPENSION OF VETERANS COMMUNITY CARE PROGRAM.—Section 1703(a) of such title is amended by adding at the end the following new paragraph:

“(4) Nothing in this section shall be construed to authorize the Secretary to suspend the program established under paragraph (1).”.

(c) ESTABLISHMENT OF REQUIREMENTS FOR DOCUMENTATION OF POSTPONEMENT OF APPOINTMENT DATE.—Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall establish a process and requirements for facilities of the Department of Veterans Affairs to document the agreement of a veteran to postpone an appointment as specified under section 1703B of title 38, United States Code, as amended by subsection (a).

AUTHORITY FOR COMMITTEES TO MEET

Mr. DURBIN. Mr. President, I have eight requests for committees to meet during today's session of the Senate. They have the approval of the Majority and Minority Leaders.

Pursuant to rule XXVI, paragraph 5(a), of the Standing Rules of the Senate, the following committees are authorized to meet during today's session of the Senate:

COMMITTEE ON FINANCE

The Committee on Finance is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 10 a.m., to conduct a hearing.

COMMITTEE ON FOREIGN RELATIONS

The Committee on Foreign Relations is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 10 a.m., to conduct a closed briefing.

COMMITTEE ON FOREIGN RELATIONS

The Committee on Foreign Relations is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 3 p.m., to conduct a hearing on nominations.

COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS

The Committee on Homeland Security and Governmental Affairs is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 10 a.m., to conduct a hearing.

COMMITTEE ON THE JUDICIARY

The Committee on the Judiciary is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 10 a.m., to conduct a hearing.

SUBCOMMITTEE ON CONSERVATION, CLIMATE, FORESTRY, AND NATURAL RESOURCES

The Subcommittee on Conservation, Climate, Forestry, and Natural Resources of the Committee on Agriculture, Nutrition, and Forestry is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 10 a.m., to conduct a hearing.

SUBCOMMITTEE ON PUBLIC LANDS, FORESTS, AND MINING

The Subcommittee on Public Lands, Forests, and Mining of the Committee on Energy and Natural Resources is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 3 p.m., to conduct a hearing.

SUBCOMMITTEE ON TOURISM, TRADE, AND EXPORT PROMOTION

The Subcommittee on Tourism, Trade, and Export Promotion of the Committee on Commerce, Science, and Transportation is authorized to meet during the session of the Senate on Tuesday, June 7, 2022, at 3 p.m., to conduct a hearing.

PRIVILEGES OF THE FLOOR

Ms. MURKOWSKI. Mr. President, I ask unanimous consent that privileges of the floor be granted to my first session summer interns for the month of June; that is Harold Monroe, Gracelyn Gohr, Charlee Korthuis, Dustin Lozano,